## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOC	UN	<b>1ENT</b>	#	P40	)533

(2)

Principal Place	SSIC SOFT TRIM, INC. DO OF Business 2. SUITE 650 TAL OF TEXAS HWY, SOUTH 3. 78746				
		AUSTIN TX 78746		3. Date incorporated or Qua 09/17/1992	3a. Date of Last Report 05/18/1995
	Place of Business LIME CREEK RO.	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	26 <b>P.O. Box</b> Suite, Apt. #, etc.	1899	76-0281362	Not Applicab
2		27		5. Certificate of Status Desire	ed Sa.75 Additional Fee Required
Oity & State		City & State	\. <del>'</del> -\	6. Election Campaign Finance	sing _ \$5.00 May Re
3 LEAN Zip	Country	28 CEDAR F	ARK, TX	Trust Fund Contribution	Added to Fees
7864	11 25 U.S.A.	29 78/ 30	30 USA	B. This corporation has liabili     Florida Statutes	ity for intangible tax under s 199,032, ] Yes ⊠N⊃
	9. Name and Address of Current	t Registered Agent		10. Name and Address of N	
C T CO	DRPORATION SYSTEM		B1 Name		
1200 St	OUTH PINE ISLAND ROAD		82 Street	Address (P.O. Box Number is Not Acc	entable)
PLANTA	ATION FL 33324		83		· · · · · · · · · · · · · · · · · · ·
			63		-
			84 City		85 Zip Code
Pursuant to     or register.	to the provisions of Sections 607,0502 red agent, or both, in the State of Florid	and 607.1508, Florida Status	tes, the above-named c	orporation submits this statement for th	FL 19 2000
familiar wit	red agent, or both, in the State of Florid ith, and accept the obligations of, Section	ia. Such change was authori <sub>e</sub> on 607.0505. Etorida Statute:	ed by the corporation's	board of directors. I hereby accept the	appointment as registered agent. Lam
			5.		5
ignature.			•		<b>3</b>
IGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable (No	DTE: Registered Agent signature	recipited when reinstating	DATE
	Signature, typed or printed name of registered agent a OFFICERS AND	ond title il applicable (NC) DIRECTORS	DTE: Registered Agent signature i	recipited when reinstating	
ILE	P	and title if applicable (No	DTE: Registered Agent signature  13. 1 11TLE	recipited when reinstating	DATE OFFICERS AND DIRECTORS IN 12
LE ME	OFFICERS AND P FORRISTER, DWIGHT 1250 CAPITAL OF TEXAS HW	ure time il applicable (NC D DIRECTORS	DTE: Registereo Agent signature  13. 1 1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO	DATE  DEFICERS AND DIRECTORS IN 12  Change
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ON SIGNING OFFICER OR DIRECTOR

3/29/96 (5/2)257-2500